In this issue of Hämostaseologie five case reports are published (1–5) besides an interdisciplinary guideline (S2K-Leitlinie der ständigen Kommission Pädiatrie der Gesellschaft für Thrombose- und Hämostaseforschung) (6), a review concerning von Willebrand disease and TTP (7) and an original paper comparing the computerized dosage of phenprocoumon with the physician guided treatment (8).

**Pearls of Vienna 2014**

These five case reports were presented by clinicians and scientists from Germany, Austria and Switzerland in a scientific symposium designated “Pearls in Haemostasis and Thrombosis” at the 58th Annual Meeting of the GTH held in Vienna on February 12 through 15, 2014.

The scientific value of publishing case reports may be questioned and several medical journals do not or only exceptionally accept those anecdotal reports. Evidently, case reports will neither contribute to "evidence-based medicine" nor provide generally valid new insights into the pathophysiology of diseases. Only systematic experimental investigations will potentially reveal insights into disease mechanisms and randomized controlled trials or at least carefully conducted cohort or case-control studies are needed to add to objective medical evidence. Nevertheless, these case reports on various clinical and laboratory problems related to thromboembolic conditions and dysfunctional haemostasis (1–5) should clearly have an educational value and make a sound proposal of how to approach a given clinical setting. In daily practice physicians are often confronted with challenging medical situations where the diagnostic reasoning and/or therapeutic decisions have to be based on very limited objective evidence. We hope that the presented case histories may stimulate the readers to critically reflect the diagnostic and therapeutic decisions reported here. We stress that the authors were not asked to present optimally managed “idea-lised” cases but real-life patients from their practice. Readers are encouraged to dispute the management of the patients reported here whenever disagreement with the diagnostic or therapeutic approach should ensue.

As the organisers of the educational scientific session “Pearls in Haemostasis and Thrombosis” we thank the Editor-in-Chief, Prof. Dr. Rüdiger Scharf, for his willingness to accept this case series for publication in this issue of Hämostaseologie. It is evident that all five case reports had to undergo rigorous peer-review and most manuscripts had to be substantially revised before they were accepted for publication.

We kindly ask the readers of Hämostaseologie who are usually offered important state-of-the-art review papers and guidelines to communicate their view concerning the value of case reports in general. Specifically the authors of the five case histories (1–5) will be glad to respond to possible concerns with the reported management.

**References**